24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Progressive Caucus PAC	
	C C00513176
Check if 24-hour report 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Deliver Strategies LLC	M = M / D = D / Y = Y = Y
Mailing Address PO Box 100970	06 17 2020 Amount
	,
City State Zip Code	22787.84
Arlington VA 22210-3970	Transaction ID: VQZ94AM9GF8 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate Category/ Type O04	M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District:17
JONES, MONDAIRE, , ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	ursement For: ✓ Primary General Other (specify) ✓
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M - M / B - B / Y - Y - Y - Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disbr	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	22787.84
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(c) TOTAL Independent Expenditures	22787.84
	22707.04
Under penalty of perjury I certify that the independent expenditures reported herein were not mouth, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Evans, Diane, , ,	M / D D / Y Y Y Y
	06 18 2020
Oignature	